

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF U.S. DEPARTMENT OF THE TREASURY	COURT CASE NUMBER 1:21-cv-00717 CAP
DEFENDANT SEIZED FEDERAL SECURITIES	TYPE OF PROCESS SUBPOENA/WARRANT

SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN MARTINS TOWING INC
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 17180 DIX TOLEDO HWY, BROWNS TOWN, MI 48192

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

U.S. DEPARTMENT OF THE TREASURY
Attn: Mr. Brent J. McIntosh
(General Counsel)
1500 Pennsylvania Ave., NW
Washington, DC 20220

Number of process to be served with this Form 285

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

(SEE ATTACHED WARRANT)

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

FILED IN CLERK'S OFFICE
U.S.D.C. - Atlanta

JUL 29 2021

KEVIN P. WEIMER, Clerk
By: [Signature] Deputy Clerk

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 39	District to Serve No. E/MI	Signature of Authorized USMS Deputy or Clerk [Signature]	Date 7/23/21
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I hereby certify and return that ☒ I have personally served, ☐ I have legal evidence of service, ☐ I have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

Ashley Poore (Office Manager)

Address (complete only different than shown above)

Same as above

☒ A person of suitable age and discretion then residing in defendant's usual place of abodeDate
7/23/2021Time
9:43☒ am
☐ pmSignature of U.S. Marshal or Deputy
[Signature] # 31009

Service Fee	Total Mileage Charges including endeavors 14 miles / 1 endeavor	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund) \$0.00
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REMARKS:

Served without incident to Ashley Poore, Office Manager of Martins Towing INC. on 7/23/2021 @ 0943 hrs.

PRINT 5 COPIES:

1. CLERK OF THE COURT * 1 endeavor 7/27/2021
2. USMS RECORD * 14 miles
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT * 1 hour

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/15/80
Automated 01/00